

Academic Stress and Coping Strategies among Students With and Without Learning Disabilities

Amirhossein Ahmadi¹, Narges Adibsereshki^{1*}, Mohsen Vahedi²

¹Department of Psychology and Exceptional Children Education, University of Social Welfare and Rehabilitation Sciences, Tehran, Iran

²Department of Statistic, University of Social Welfare and Rehabilitation Sciences, Tehran, Iran

*Corresponding Author: Narges Adibsereshki, Email: na.adib@uswr.ac.ir

Abstract

Background: Students with learning disabilities, due to their limitations and difficulties in learning certain subjects, experience greater academic stress compared to their peers. Given the importance of psychological well-being among students with learning disabilities, attention to academic stress and the use of effective coping strategies appear to be crucial. The present study aimed to examine and compare academic stress and coping strategies among students with and without learning disabilities.

Materials and Methods: This study employed a cross-sectional design. The research sample consisted of 70 students aged 10 to 12 years with learning disabilities who attended learning disorder centers in various cities in Mazandaran Province, Iran, during 2022, and 70 of their peers from regular schools in the same cities who received mainstream education. Data were collected using the Gadzella Student-Life Stress Inventory and the Coping Inventory for Stressful Situations (CISS) developed by Endler and Parker. Multivariate Analysis of Variance (MANOVA) and independent samples t-tests were employed to examine the research hypotheses.

Results: Students with learning disabilities exhibited higher levels of academic stress and a greater use of avoidance-oriented coping strategies ($P < 0.05$). However, no significant difference was observed between the two groups in the mean scores of problem-focused and emotion-focused coping strategies ($P > 0.05$).

Conclusion: As the findings of this study demonstrated, students with learning disabilities experience higher levels of academic stress compared to their typically developing peers and tend to rely more on avoidance-oriented coping strategies when facing stressful situations. Educational planners, teachers, and therapists can design and implement targeted interventions to help such students develop and utilize more effective coping strategies during stressful academic experiences.

Keywords: Academic stress, Learning, Learning disability, Coping strategies

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Introduction

Learning disability is a disorder in one or more of the basic psychological processes involved in understanding or using language. This disorder manifests itself as difficulties in listening, thinking, speaking, reading, writing, spelling, or performing mathematical calculations, and it typically becomes apparent during the early years of schooling (1). Learning disability is relatively common among school-aged children, with an estimated prevalence rate ranging between 5% and 15% (2). In Iran, the prevalence of learning disabilities at primary school is reported to be 4.6%, with boys being affected 1-2% more frequently than girls (3). According to available statistics, the prevalence rate of mathematical learning disorders among elementary school students is 11% for boys and 9% for girls, while reading disorders affect 15% of boys and 11% of girls (4).

Learning disabilities can significantly increase students'

academic stress by intensifying educational challenges. Academic stress can be defined as a relationship between the student and the demands of the educational environment that is perceived by the student as threatening or endangering their well-being (5). More specifically, academic stress arises when students feel unable to cope with academic demands, activities, or school-related situations, resulting in emotional tension (6). High or chronic levels of stress may lead to poor academic performance, school dropout (7), poor sleep quality (8), depressive symptoms and lack of motivation (9), social maladjustment and situational anxiety, anticipatory anxiety regarding stressful events (10), and even suicidal ideation (11). In a study conducted in Iran, students aged 7 to 17 years with learning disabilities reported severe stress and severe anxiety rates of 16% and 20%, respectively (12).

One of the primary ways to deal with such difficulties



and stressors is through the use of effective coping strategies. Coping strategies are defined as a set of behavioral and cognitive responses aimed at minimizing the pressure of stressful situations. These strategies are generally divided into two main categories: emotion-focused and problem-focused coping strategies (13). In addition to these strategies, three major types of coping with stress have been identified: problem-focused coping, emotion-focused coping, and avoidance-oriented coping (14). Research indicates that many students with learning disabilities struggle to employ effective coping strategies when facing stressful situations. They tend to use fewer adaptive coping mechanisms in challenging circumstances because they often perceive themselves as less competent both academically and socially (15). Moreover, such students are more likely to adopt unproductive strategies such as denial, avoidance, or disengagement when dealing with problems (16). Stress in individuals with learning disabilities can lead to challenges in social interactions, education, employment, and daily life activities, which may contribute to feelings of isolation and low self-esteem (17), as well as an increased risk of suicidal ideation, depression, and school dropout (18).

Accordingly, considering the potential impact of stress and coping mechanisms on students with learning disabilities, along with the inconsistent findings regarding the level of academic stress among these students compared to their peers, and given the scarcity of research in Iran on academic stress and coping strategies among students with learning disabilities, the present study aimed to compare academic stress and coping strategies between students with and without learning disabilities.

Methods

The present study adopted a cross-sectional design. The research population consisted of students aged 10 to 12 years who attended learning disability centers, as well as typically developing students of the same age group from cities across Mazandaran Province, Iran. The total sample included 140 students (70 with learning disabilities and 70 without learning disabilities) selected through convenience sampling. All participants were enrolled in the upper elementary grades (fourth, fifth, and sixth) and met the inclusion criteria. The exclusion criteria were the presence of other disorders such as sensory, physical, or psychological impairments, lack of cooperation, or unwillingness to continue participation.

For sample selection, after obtaining an official letter of introduction from the Mazandaran Provincial Department of Education, the researcher visited learning disability centers in five cities of the province (Babol, Nowshahr, Qaemshahr, Sari, and Chalous), all operating under the supervision of local education departments. Altogether, students with learning disabilities were recruited from six centers, two located in Sari and one in

each of the other four cities. Seventy students who had previously been diagnosed with a learning disability, as documented in their official records, and were currently receiving educational services from these centers, were selected with the centers' confirmation and after obtaining parental consent and ensuring adherence to ethical standards. Moreover, for the selection of students without learning disabilities, a purposive sampling method was used. In consultation with the relevant officials from the Department of Education, five regular schools in each of the same cities, those with a strong record of research collaboration, were approached. Seventy students confirmed by their teachers to have no learning difficulties in any subjects were chosen for participation.

The data in this study were collected using a structured questionnaire composed of three distinct sections. The first section included demographic information such as age, gender, and grade level, as well as the presence or absence of a learning disability. The second section comprised items from the Gadzella Student-Life Stress Inventory, which assessed academic stress. The final section consisted of items from the Coping Inventory for Stressful Situations (CISS), which measured coping styles in stressful situations. Additional details of the instruments are described below.

Gadzella Student-Life Stress Inventory

To assess the level of academic stress among students, the Gadzella Student-Life Stress Inventory (19) was used. This self-report, paper-and-pencil instrument consists of 51 items organized into nine categories. The model evaluates five categories of stressors—namely, frustrations, conflicts, pressures, changes, and self-imposed stress—and four types of reactions to these stressors, including physiological, emotional, behavioral, and cognitive appraisal responses. In each subscale, the total score is obtained by summing the relevant items, with higher scores indicating greater levels of academic stress and stronger reactions to stress. In the section assessing academic stressors, the frustration subscale contains seven items, the conflict subscale three items, the changes subscale three items, the pressures subscale four items, and the self-imposed stress subscale six items. In the section on reactions to stressors, the four types of academic stress reactions are measured through 14 items for physiological responses, 4 items for emotional responses, 8 items for behavioral responses, and 2 items for cognitive appraisal. The students were instructed to read each statement carefully and indicate their response on a 5-point Likert scale ranging from 1 (“never”), 2 (“rarely”), 3 (“sometimes”), 4 (“often”), to 5 (“always”). The total score on the questionnaire thus ranges from 51 to 255, with higher scores reflecting greater academic stress. The Persian version of this instrument was translated and validated by Shokri et al. (2006), showing

strong content validity, cultural appropriateness, and reliability (Cronbach's $\alpha = 0.80$) (20).

Coping Inventory for Stressful Situations (CISS)

To assess coping mechanisms, the Coping Inventory for Stressful Situations (CISS), developed by Endler and Parker (1990) (21) and translated into Persian by Akbarzadeh (22), was used. According to Afrasiabi and Akbarzadeh (2007) study, this instrument demonstrated reliability coefficients above 0.80 across its subscales (23). The questionnaire comprises 48 items rated on a 5-point Likert scale ranging from 1 ("never"), 2 ("rarely"), 3 ("sometimes"), 4 ("often"), to 5 ("always"). It evaluates three major dimensions of coping behavior: problem-focused coping, which refers to an active and direct approach toward managing and resolving the stressful situation (16 items); emotion-focused coping, which emphasizes emotional responses and regulation in reaction to stress (16 items); and avoidance-oriented coping, which involves efforts to escape or distract oneself from the stressor (16 items), and is further divided into two subdimensions—social diversion and distraction.

Given the 5-point Likert format, the maximum score for each item is 5, and the minimum is 1. Participants are required to respond to all items. If a participant leaves five or fewer items unanswered, the researcher assigns a neutral score of 3 to those items. However, if more than five items remain unanswered, the questionnaire is excluded from scoring. The total scores for each of the three coping dimensions—problem-focused, emotion-focused, and avoidance-oriented—can therefore range from 16 to 80. The individual's dominant coping style is determined by the highest score among these three categories, representing the coping behavior most frequently employed by the respondent.

Data Analysis

Data were analyzed using descriptive statistics (mean and standard deviation) as well as inferential statistics, specifically multivariate analysis of variance (MANOVA) and independent samples t-tests. The significance level was set at 0.05 for all tests. Data analysis was conducted using SPSS-27 software.

Results

In this study, nearly half of the students in both groups were eleven years old (31 students, 44.28% with learning disabilities; 34 students, 48.57% without learning disabilities). In both groups, boys constituted the majority of participants (54 students, 77.14% with learning disabilities; 43 students, 61.43% without learning disabilities). The detailed demographic information of the respondents, including age and gender, is presented in Table 1:

The descriptive statistics for academic stress, problem-

focused coping, emotion-focused coping, and avoidance-oriented coping among students with and without learning disabilities are presented in Table 2:

As shown in Table 2, the mean score of academic stress in students with learning disabilities (121.03 ± 16.27) was significantly higher than that of students without learning disabilities (86.19 ± 14.24). Similarly, the mean score of avoidance-oriented coping in students with learning disabilities (5.037 ± 13.02) was significantly higher than that of students without learning disabilities (43.50 ± 14.03). In contrast, the differences between the two groups in problem-focused and emotion-focused coping strategies were not statistically significant ($p > 0.05$). Overall, the findings indicate that students with learning disabilities experience higher levels of academic stress and tend to rely more on avoidance-oriented strategies when dealing with problems (Table 2).

Based on the results presented in Table 3, multivariate tests, including Pillai's Trace, Wilks' Lambda, Hotelling's Trace, and the largest root, all indicate a significant difference between students with and without learning disabilities across the studied variables (academic stress, problem-focused coping, emotion-focused coping, and avoidance-oriented coping). Specifically, Wilks' Lambda was 0.421, with $F(4, 135) = 46.35$, $p < 0.05$, indicating a significant overall difference between the two groups.

Furthermore, the effect size ($\eta^2 = 0.579$) suggests that approximately 58% of the variance in the linear combination of the dependent variables is explained by group membership (with or without learning disabilities), representing a large effect. Thus, it can be concluded that, overall, the two groups differ significantly in the set of variables under investigation.

Discussion

The findings from this study indicated that the levels of academic stress and coping strategies differ between students with and without learning disabilities, with students with learning disabilities relying more heavily on avoidance-oriented strategies than their typically developing peers. One notable finding of the present study was that students with learning disabilities experience higher levels of academic stress compared to students without learning disabilities. These findings are consistent with the results reported by Panicker and Chelliah (12), Jena (24), Alexander-Passe (25), and Khodadadi et al. (16), who demonstrated that students with learning difficulties report higher levels of school-related stress than their non-disabled counterparts. However, some studies, such as those by Geisthardt and Munsch (26), found no significant difference in the level of academic stress experienced between students with and without learning disabilities, although students with learning disabilities were more likely to encounter classroom failure. Academic stress during this period

Table 1. The demographic characteristics of students with and without learning disabilities

Demographic characteristics	Levels	Students with learning disabilities		Students without learning disabilities	
		<i>n</i>	%	<i>n</i>	%
Age (year)	10	18	25.71	17	24.28
	11	31	44.28	34	48.57
	12	21	30.00	19	27.14
Gender	Female	23	32.86	20	28.57
	Male	54	77.14	43	61.43

Table 2. The descriptive statistics for the research variable in students with and without learning disabilities

Components	Students with learning disabilities (N=70)		Students without learning disabilities (N=70)		Independent t-test	
	Mean	SD	Mean	SD	t	P value
Academic stress	121.03	16.27	86.19	14.24	-13.48	0.001
Problem-focused coping	46.44	13.26	50.01	12.56	1.63	0.104
Emotion-focused coping	46.87	13.20	50.17	13.75	1.44	0.150
Avoidance-oriented coping	50.73	13.02	43.50	14.03	-3.15	0.002

Table 3. Multivariate analysis of variance (MANOVA) for comparing mean academic stress, problem-focused coping, emotion-focused coping, and avoidance-oriented coping

Test Name	Value	F	df	Error df	Sig. (p)	Effect Size (η^2)
Pillai's Trace	0.579	46.351	4	135	0.001	0.579
Wilks' Lambda	0.421	46.351	4	135	0.001	0.579
Hotelling's Trace	1.373	46.351	4	135	0.001	0.579
Largest Root	1.373	46.351	4	135	0.001	0.579

can adversely affect both the psychological and physical health of students and lead to a wide range of academic difficulties. Effective stress management skills have the potential to provide long-term benefits for youth, given that many health-related behaviors and patterns, both positive and negative, are established during this stage of life. Therefore, creating opportunities to enhance stress-related coping abilities during this period is of critical importance (26).

The present study also showed no significant differences between students with and without learning disabilities in the use of coping strategies, especially problem-focused and emotion-focused coping strategies. These findings are in line with the studies of Bagnato (15) and Firth et al. (27), which indicated no significant differences in the use of adaptive and maladaptive coping strategies among elementary school students with learning disabilities and their peers. Moreover, the findings are supported by research showing that there were no significant differences in emotion-focused and problem-focused coping strategies between German and Indonesian students with learning disabilities (28).

Importantly, this study yielded notable results regarding avoidance-oriented coping. Students with learning disabilities were more likely than their peers to employ avoidance coping strategies. Similarly, Firth et al. (27) reported that students with learning disabilities

frequently relied on strategies such as problem neglect and non-engagement. They found that many adolescents with learning disabilities, compared to their non-disabled peers, tend to use non-productive coping strategies, such as ignoring problems, avoiding challenges, and self-blame, more often than effective strategies, such as making greater efforts or focusing on positive aspects. Instead of active coping, they exhibit more aggressive and escape behaviors compared to their non-disabled peers (29). These findings are partially consistent with the studies by Desalegn et al. (30) and Lone et al. (31), which revealed that children with physical disabilities also tend to rely on emotion-focused and avoidance-oriented coping strategies.

Studies offer various perspectives regarding the causes of poor coping skills in students with learning disabilities. Research findings have demonstrated that deficits in cognitive and social skills are among the primary reasons for the reduced use of adaptive coping strategies in adolescents with learning disabilities. These findings may be attributable to the fact that cognitive and social deficits impair their ability to accurately assess problems and engage in information-seeking behaviors (27). In stressful situations, students with learning disabilities are more likely than their non-disabled peers to employ cognitive avoidance as a coping mechanism. Delayed cognitive development may influence the use of coping skills that

require complex cognitive manipulations. Consequently, compared to their peers, students with learning disabilities tend to rely on coping mechanisms such as cognitive avoidance and emotional discharge, which require simpler cognitive processes. When presented with straightforward options for managing stressful situations, they may be able to utilize their limited cognitive resources effectively. Similarly, a lack of control over stressful situations can lead to the use of denial as a coping mechanism among students with learning disabilities (27).

Studies have also identified several effective strategies that may help reduce stress and promote psychological and emotional well-being in children and adolescents with specific learning disabilities at the individual, family, school, and community levels. At the individual level, incorporating mindfulness exercises and meditation has shown promising results in reducing stress and enhancing resilience in children and adolescents with specific learning disabilities (32). At the family level, adapting the home environment to provide emotional support and implementing interventions that address caregiver stress and emotional well-being can have downstream benefits for the child's emotional health (33). In schools, the use of social-emotional learning curricula and mentoring programs has been demonstrated to support mental health and emotional well-being, thereby reducing stress (34).

Among the limitations of this study were the relatively small sample size and its restriction to certain cities within one province. Given the relatively limited sample, there was insufficient statistical power to conduct comparisons between male and female students in terms of stress and coping strategies. Since the use of coping strategies appears to be influenced by both gender and age, future studies should examine stress and coping strategies in children with learning disabilities using larger samples with a broader age range. This approach would allow for consideration of age- and gender-related differences and could provide valuable information for prevention and intervention efforts.

Conclusion

Based on the findings from this study, students with learning disabilities experience higher levels of academic stress compared to their peers. Although no significant differences were observed between the two groups in the use of problem-focused and emotion-focused coping strategies, students with learning disabilities relied more heavily on avoidance-oriented coping strategies. These results highlight the significance of providing targeted support for these students within educational settings. Implementing support services and designing school-based programs for stress management and coping skills training may help reduce stress, enhance socio-emotional regulation, and improve academic performance.

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Authors' Contribution

Conceptualization: Amirhossein Ahmadi, Narges Adibsereshki.

Data curation: Mohsen Vahedi, Amirhossein Ahmadi.

Formal analysis: Amirhossein Ahmadi.

Investigation: Amirhossein Ahmadi, Narges Adibsereshki.

Methodology: Amirhossein Ahmadi, Narges Adibsereshki, Mohsen Vahedi.

Project administration: Amirhossein Ahmadi.

Resources: Narges Adibsereshki, Firouzeh Sajedi, Mohsen Vahedi

Software: Amirhossein Ahmadi.

Supervision: Narges Adibsereshki, Firouzeh Sajedi, Mohsen Vahedi

Validation: Amirhossein Ahmadi.

Visualization: Amirhossein Ahmadi.

Writing – original draft: Amirhossein Ahmadi, Narges Adibsereshki

Writing – review & editing: Amirhossein Ahmadi, Narges Adibsereshki.

Competing Interests

The authors declare no conflict of interest.

Ethical Approval

This study was conducted after obtaining the ethical approval code (IR.USWR.REC.1400.170) from the University of Rehabilitation Sciences and Social Health. Participation in the study was entirely voluntary, and all questionnaires were completed anonymously.

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